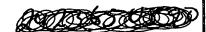
10/656213

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003



CLAIMS AS FILED - PART I						O)		SMALL ENTITY		OTHER THAN		
TOTAL CLAIMS			(Column 1)		(Column 2)		١,	TYPE		OR SMALL ENTITY		
TOTAL CLAIMS			2					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			3 minus 20=		. 8			X\$ 9≃		ÓR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		8			X42=		OR	X84 ≈	
MULTIPLE DEPENDENT CLAIM PRESENT							• •	+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter						olumn 2	•	TOTAL.		OR	TOTAL	750
CLAIMS AS AMENDED - PART II											OTHER	THAN
10		(Column 1)		(Colui		(Column 3)	_	SMALL ENTITY		OR SMALL ENTIT		ENTITY
A		CLAIMS REMAINING		HIGH NUM		PRESENT			ADDI-			ADDI-
AMENDMENTA		AFTER AMENDMENT		PREVI PAID	OUSLY	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	* 3	Minus	** 2		=	╀	X\$*9=~		OR	X\$18=	·
	Independent	* /	Minus	*** /	3	=		X42=		OR	_X84≃	·
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
		* * * * * * * * * * * * * * * * * * *			٠.			+140=		OR	+280=	
										OR	TOTAL ADDIT. FEE	
		(Column 1)		_(Colu	mn 2)	(Column 3	<u>L</u>			•		÷
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	,
Ě	independent	*	Minus	***		=]	X42=		OR	X84=	
4	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	T CLAIM		_]	<u> </u>				<u> </u>
	•		*					+140=		OR	+280=	
								ADDIT. FEE	Ĺ <u></u>	OR	ADDIT. FEE	
	,	(Column 1)		(Colu	ımn 2)	(Column 3	3)					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X42=		OR	X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								 			
								+140=		OR		
** If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											TOTAL ADDIT. FEE	
. **	'Il the "Highest Nu The "Highest Nur	imber Previously I nber Previously P	aid For" (Total o	or Indepen	dent) is th	ie highest num	ber f	ound in the ap	propriate bo	x in c		
										; -		